

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Sunovion Pharmaceuticals Inc. Good Governance Fund

ADDRESS (number and street) ▼

84 Waterford Drive

☐ Check if different than previously reported. (ACC)

Marlborough

MA

01752

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00423236

3. IS THIS REPORT

☒

NEW (N)

OR

☐

AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☐ April 15 Quarterly Report (Q1)
- ☐ July 15 Quarterly Report (Q2)
- ☐ October 15 Quarterly Report (Q3)
- ☐ January 31 Year-End Report (YE)
- ☐ July 31 Mid-Year Report (Non-election Year Only) (MY)
- ☐ Termination Report (TER)

(b) Monthly Report Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11) (Non-Election Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12) (Non-Election Year Only)
- ☒ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day

PRE-Election Report for the:

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

(d) 30-Day

POST-Election Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
03 01 2016

through

M M M / D D D / Y Y Y Y Y Y
03 31 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Stephen Freeman

Signature of Treasurer

Stephen Freeman

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
04 19 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Sunovion Pharmaceuticals Inc. Good Governance Fund

Report Covering the Period:

From:

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	01	/	2016

To:

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date																		
6. (a) Cash on Hand January 1, <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="6">2016</td></tr></table>	Y	Y	Y	Y	Y	Y	2016							<table><tr><td colspan="6">54134.78</td></tr></table>	54134.78					
Y	Y	Y	Y	Y	Y															
2016																				
54134.78																				
(b) Cash on Hand at Beginning of Reporting Period.....	<table><tr><td colspan="6">39874.78</td></tr></table>	39874.78																		
39874.78																				
(c) Total Receipts (from Line 19)	<table><tr><td colspan="6">5374.00</td></tr></table>	5374.00						<table><tr><td colspan="6">12314.00</td></tr></table>	12314.00											
5374.00																				
12314.00																				
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<table><tr><td colspan="6">45248.78</td></tr></table>	45248.78						<table><tr><td colspan="6">66448.78</td></tr></table>	66448.78											
45248.78																				
66448.78																				
7. Total Disbursements (from Line 31).....	<table><tr><td colspan="6">12500.00</td></tr></table>	12500.00						<table><tr><td colspan="6">33700.00</td></tr></table>	33700.00											
12500.00																				
33700.00																				
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table><tr><td colspan="6">32748.78</td></tr></table>	32748.78						<table><tr><td colspan="6">32748.78</td></tr></table>	32748.78											
32748.78																				
32748.78																				
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td colspan="6">0.00</td></tr></table>	0.00																		
0.00																				
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td colspan="6">0.00</td></tr></table>	0.00																		
0.00																				



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Sunovion Pharmaceuticals Inc. Good Governance Fund

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y
 03 / 01 / 2016

To:

 M M / D D / Y Y Y Y Y
 03 / 31 / 2016
I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

1745.00

2795.00

(ii) Unitemized

3629.00

9519.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

5374.00

12314.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

5374.00

12314.00

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

5374.00

12314.00

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

5374.00

12314.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	12500.00	33500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	200.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	200.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	12500.00	33700.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	12500.00	33700.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	5374.00	12314.00
34. Total Contribution Refunds (from Line 28(d))	0.00	200.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5374.00	12114.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	0.00	0.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 15

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Sunovion Pharmaceuticals Inc. Good Governance Fund

Full Name (Last, First, Middle Initial)

A. Matthew D'Ambrosio

Mailing Address 3 Avery Street

City State Zip Code
 Boston MA 02111

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Sunovion Pharmaceuticals Sr VP & Chief Compliance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 03 / 2016

Transaction ID : SA11AI.19316

Amount of Each Receipt this Period

200.00

☐ Memo Item
 Payroll Deduction

Full Name (Last, First, Middle Initial)

B. Matthew D'Ambrosio

Mailing Address 3 Avery Street

City State Zip Code
 Boston MA 02111

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Sunovion Pharmaceuticals Sr VP & Chief Compliance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 17 / 2016

Transaction ID : SA11AI.19410

Amount of Each Receipt this Period

200.00

☐ Memo Item
 Payroll Deduction

Full Name (Last, First, Middle Initial)

C. Matthew D'Ambrosio

Mailing Address 3 Avery Street

City State Zip Code
 Boston MA 02111

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Sunovion Pharmaceuticals Sr VP & Chief Compliance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016

Transaction ID : SA11AI.19508

Amount of Each Receipt this Period

200.00

☐ Memo Item
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

600.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 15

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sunovion Pharmaceuticals Inc. Good Governance Fund

Full Name (Last, First, Middle Initial)

A. April S Grant

Mailing Address 6387 Dwane Ave

City State Zip Code
 San Diego CA 92120

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Sunovion Pharmaceuticals

Occupation
 Director State Government Affa

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
 03 / 31 / 2016

Transaction ID : SA11AI.19521

Amount of Each Receipt this Period

30.00

☐ Memo Item

Payroll Deduction

Full Name (Last, First, Middle Initial)

B. Pamela Krengel

Mailing Address 225 Northern Ave Apt # 1208

City State Zip Code
 Boston MA 02210

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Sunovion Pharmaceuticals

Occupation
 Sr Director Aerosol Products

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 03 / 03 / 2016

Transaction ID : SA11AI.19341

Amount of Each Receipt this Period

50.00

☐ Memo Item

Payroll Deduction

Full Name (Last, First, Middle Initial)

C. Pamela Krengel

Mailing Address 225 Northern Ave Apt # 1208

City State Zip Code
 Boston MA 02210

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Sunovion Pharmaceuticals

Occupation
 Sr Director Aerosol Products

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
 03 / 17 / 2016

Transaction ID : SA11AI.19437

Amount of Each Receipt this Period

50.00

☐ Memo Item

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

130.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Sunovion Pharmaceuticals Inc. Good Governance Fund

Full Name (Last, First, Middle Initial)

A. Pamela Krengel

Mailing Address 225 Northern Ave Apt # 1208

City
Boston

State
MA

Zip Code
02210

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sunovion Pharmaceuticals

Occupation

Sr Director Aerosol Products

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

03 / 31 / 2016

Transaction ID : SA11AI.19536

Amount of Each Receipt this Period

50.00

☐ Memo Item

Payroll Deduction

Full Name (Last, First, Middle Initial)

B. Anthony Magnetti

Mailing Address 37 Old Nourse Road

City
Westboro

State
MA

Zip Code
01581

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sunovion Pharmaceuticals

Occupation

VP Government Affairs.EVP35

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

03 / 03 / 2016

Transaction ID : SA11AI.19345

Amount of Each Receipt this Period

75.00

☐ Memo Item

Payroll Deduction

Full Name (Last, First, Middle Initial)

C. Anthony Magnetti

Mailing Address 37 Old Nourse Road

City
Westboro

State
MA

Zip Code
01581

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sunovion Pharmaceuticals

Occupation

VP Government Affairs.EVP35

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

03 / 17 / 2016

Transaction ID : SA11AI.19441

Amount of Each Receipt this Period

75.00

☐ Memo Item

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 9 OF 15

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sunovion Pharmaceuticals Inc. Good Governance Fund

Full Name (Last, First, Middle Initial)

A. Anthony Magnetti

Mailing Address 37 Old Nourse Road

City

Westboro

State

MA

Zip Code

01581

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sunovion Pharmaceuticals

Occupation

VP Government Affairs.EVP35

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

03 / 31 / 2016

Transaction ID : SA11AI.19540

Amount of Each Receipt this Period

75.00

☐ Memo Item

Payroll Deduction

Full Name (Last, First, Middle Initial)

B. Eric Rasmussen

Mailing Address 1018 N. Pelham St

City

Alexandria

State

VA

Zip Code

22304

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sunovion Pharmaceuticals

Occupation

Sr Director Federal Government

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

03 / 03 / 2016

Transaction ID : SA11AI.19369

Amount of Each Receipt this Period

50.00

☐ Memo Item

Payroll Deduction

Full Name (Last, First, Middle Initial)

C. Eric Rasmussen

Mailing Address 1018 N. Pelham St

City

Alexandria

State

VA

Zip Code

22304

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sunovion Pharmaceuticals

Occupation

Sr Director Federal Government

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 17 / 2016

Transaction ID : SA11AI.19465

Amount of Each Receipt this Period

50.00

☐ Memo Item

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

175.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 15

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Sunovion Pharmaceuticals Inc. Good Governance Fund

Full Name (Last, First, Middle Initial)

A. Eric Rasmussen

Mailing Address 1018 N. Pelham St

City	State	Zip Code
Alexandria	VA	22304

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sunovion Pharmaceuticals

Occupation

Sr Director Federal Government

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03	/	31	/	2016

Transaction ID : SA11AI.19566

Amount of Each Receipt this Period

50.00

☐ Memo Item

Payroll Deduction

Full Name (Last, First, Middle Initial)

B. Anthony S Severoni

Mailing Address 10 William Howard Dr

City	State	Zip Code
Glen Mills	PA	19342

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sunovion Pharmaceuticals

Occupation

Sr Director State Government A

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03	/	17	/	2016

Transaction ID : SA11AI.19471

Amount of Each Receipt this Period

35.00

☐ Memo Item

Payroll Deduction

Full Name (Last, First, Middle Initial)

C. Anthony S Severoni

Mailing Address 10 William Howard Dr

City	State	Zip Code
Glen Mills	PA	19342

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sunovion Pharmaceuticals

Occupation

Sr Director State Government A

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03	/	31	/	2016

Transaction ID : SA11AI.19574

Amount of Each Receipt this Period

35.00

☐ Memo Item

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... ►

120.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 OF 15

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sunovion Pharmaceuticals Inc. Good Governance Fund

Full Name (Last, First, Middle Initial)

A. James M Shepherd III

Mailing Address 2252 Oceanwalk W Dr

City

Atlantic Beach

State

FL

Zip Code

32233

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sunovion Pharmaceuticals

Occupation

Account Director.FREP13

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 17 / 2016

Transaction ID : SA11AI.19472

Amount of Each Receipt this Period

35.00

☐ Memo Item

Payroll Deduction

Full Name (Last, First, Middle Initial)

B. James M Shepherd III

Mailing Address 2252 Oceanwalk W Dr

City

Atlantic Beach

State

FL

Zip Code

32233

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sunovion Pharmaceuticals

Occupation

Account Director.FREP13

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2016

Transaction ID : SA11AI.19575

Amount of Each Receipt this Period

35.00

☐ Memo Item

Payroll Deduction

Full Name (Last, First, Middle Initial)

C. Alistair Wheeler

Mailing Address 268 Whitney St

City

Northborough

State

MA

Zip Code

01532

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sunovion Pharmaceuticals

Occupation

Head of Global Clinical Resear

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 03 / 2016

Transaction ID : SA11AI.19391

Amount of Each Receipt this Period

75.00

☐ Memo Item

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

145.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 OF 15

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sunovion Pharmaceuticals Inc. Good Governance Fund

Full Name (Last, First, Middle Initial)

A. Alistair Wheeler

Mailing Address 268 Whitney St

City

Northborough

State

MA

Zip Code

01532

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sunovion Pharmaceuticals

Occupation

Head of Global Clinical Resear

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

03 / 17 / 2016

Transaction ID : SA11AI.19487

Amount of Each Receipt this Period

75.00

☐ Memo Item

Payroll Deduction

Full Name (Last, First, Middle Initial)

B. Alistair Wheeler

Mailing Address 268 Whitney St

City

Northborough

State

MA

Zip Code

01532

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sunovion Pharmaceuticals

Occupation

Head of Global Clinical Resear

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

03 / 31 / 2016

Transaction ID : SA11AI.19590

Amount of Each Receipt this Period

75.00

☐ Memo Item

Payroll Deduction

Full Name (Last, First, Middle Initial)

C. Katherine Wilson

Mailing Address 300 Stone Place, Unit 401

City

Melros

State

MA

Zip Code

02176

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sunovion Pharmaceuticals

Occupation

Director Compensation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

03 / 03 / 2016

Transaction ID : SA11AI.19393

Amount of Each Receipt this Period

75.00

☐ Memo Item

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

225.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 15
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sunovion Pharmaceuticals Inc. Good Governance Fund

Full Name (Last, First, Middle Initial)

A. Katherine Wilson

Mailing Address 300 Stone Place, Unit 401

City State Zip Code
 Melros MA 02176

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Sunovion Pharmaceuticals

Occupation
 Director Compensation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

03 / 17 / 2016

Transaction ID : SA11AI.19489

Amount of Each Receipt this Period

75.00

☐ Memo Item
 Payroll Deduction

Full Name (Last, First, Middle Initial)

B. Katherine Wilson

Mailing Address 300 Stone Place, Unit 401

City State Zip Code
 Melros MA 02176

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Sunovion Pharmaceuticals

Occupation
 Director Compensation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

03 / 31 / 2016

Transaction ID : SA11AI.19592

Amount of Each Receipt this Period

75.00

☐ Memo Item
 Payroll Deduction

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

1745.00

	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

Sunovion Pharmaceuticals Inc. Good Governance Fund

A. BENNET FOR COLORADO

Date of Disbursement

Transaction ID : SB23.19296

Amount of Each Disbursement this Period

1000.00

 Memo Item

MICHAEL F BENNET

Disbursement For: 2016

☐ Primary ☒ General

☐ Other (specify) ▼

State: CO District: 00

B. BENNET FOR COLORADO

Date of Disbursement

MM / DD / YYYY

Transaction ID : SB23.19299

Amount of Each Disbursement this Period

4000.00

 Memo Item

MICHAEL F BENNET

Disbursement For: 2016

☒ Primary ☐ General

☐ Other (specify) ▼

State: CO District: 00

C. JOE KENNEDY FOR CONGRESS

Date of Disbursement

Transaction ID : SB23.19295

Amount of Each Disbursement this Period

1500.00

 Memo Item

JOSEPH P III KENNEDY

Disbursement For: 2016

☒ Primary ☐ General

☐ Other (specify) ▼

State: MA District: 04

SUBTOTAL of Disbursements This Page (optional).....

6500.00

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 15

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Sunovion Pharmaceuticals Inc. Good Governance Fund

Full Name (Last, First, Middle Initial)

A. MIKE CRAPO FOR US SENATE

Mailing Address P.O. BOX 1948

City
BOISEState
IDZip Code
83701

Purpose of Disbursement

Candidate Name

MICHAEL D CRAPO

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: ID District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	17	/	2016

Transaction ID : SB23.19297

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. THE NIKI TSONGAS COMMITTEE

Mailing Address PO BOX 1454

City
LOWELLState
MAZip Code
01853

Purpose of Disbursement

Candidate Name

NICOLA S TSONGAS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State: MA District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	23	/	2016

Transaction ID : SB23.19298

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6000.00

12500.00
